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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
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Application Number	10/671,300
Filing Date	Sept. 24, 2003
First Named Inventor	David HOLDEN
Art Unit	3632
Examiner Name	n/y/a
Attorney Docket Number	DH-001

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
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2. ☐ Change the correspondence address and direct all future correspondence to:

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<input checked="" type="checkbox"/> Firm or Individual Name	David Holden				
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Signature				Registration No.	43,521
Date	Jan. 28, 2004			Telephone No.	(614) 486-3585

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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